

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number

10/722,993

Filing Date

26 Nov 2003

First Named Inventor

Hong, Jay Wu

Group Art Unit

2609

Examiner Name

Kenan Cehic

Attorney Docket Number

CISCO-7235

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Being paid (EFS/Credit card)	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Response	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> To Convert a Provisional Application	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Additional Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Return Postcard
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Small Entity Statement	<input type="checkbox"/>
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Request of Refund	<input type="checkbox"/>
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	Remarks	
<input type="checkbox"/>		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT/ CORRESPONDENCE ADDRESS

Firm or Individual name	Dov Rosenfeld, Reg. No. 38687
Signature	/Dov Rosenfeld/ #38687
Date	October 12, 2007

ADDRESS FOR CORRESPONDENCE

Firm or Individual name	Dov Rosenfeld 5507 College Avenue, Suite 2, Oakland, CA 94618, Tel: 510-547-3378
-------------------------------	--

Our Ref./Docket No: CISCO-7235

Patent

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Hong Application No.: 10/722,993 Filed: November 26, 2003 Title: METHOD AND APPARATUS FOR AUTOMATICALLY CONFIGURING DEVICES ON A WIRELESS NETWORK	Group Art Unit: 2609 Examiner: Kenan Cehic
--	---

TRANSMITTAL: RESPONSE TO OFFICE ACTION

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Commissioner:

Transmitted herewith is a response to an office action for the above referenced application.

If there is any required additional claim fee, it has been calculated as follows:

CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	NO. OF EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	53	MINUS	56	0	\$50	\$ 0.00
INDEP. CLAIMS	7	MINUS	7	0	\$200	\$ 0.00
TOTAL ADDITIONAL FEE DUE:						\$ 0.00

☐ Payment by EFS-Web is being made concurrently for presentation of additional claims.

☒ Applicant(s) believe(s) that no Extension of Time is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for an extension of time.

☒ Applicant(s) hereby petition(s) for an Extension of Time under 37 CFR 1.136(a) of:

☒ one months (\$120) ☐ two months (\$410)
☐ three months (\$930) ☐ four months (\$1450)

Our Ref. No.: CISCO-7235

If an additional extension of time is required, please consider this as a petition therefor.

 X Payment by EFS-Web is being made concurrently for the required fee(s) is attached.

 X The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account

No. 50-0292 (A DUPLICATE OF THIS TRANSMITTAL IS ATTACHED):

 X Any missing filing fees required under 37 CFR 1.16 for presentation of additional claims.

 X Any missing extension or petition fees required under 37 CFR 1.17.

Respectfully Submitted,

October 12, 2007
Date

/Dov Rosenfeld/ #38687
Dov Rosenfeld, Reg. No. 38687

Address for correspondence:

Dov Rosenfeld

5507 College Avenue, Suite 2,

Oakland, CA 94618

Tel. 510-547-3378; Fax: +1-510-291-2985